PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

1072171

Effective October 1, 2003									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>'</u>			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20			ŀ	.	RATE	FEE]	RATE	FEE	
FOR .			NUMBER FILED .		NUME	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	10 mir	nus 20≃	. 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		* 0		ı	X43=	•	OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							į	TOTAL		OR	TOTAL	220	
/ // CLAIMS AS AMENDED - PART II] (1)	OTHER	THAN	
6/6/6/ (Column 1) (Colum						(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
IENT A	/	CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	· 20	Minus	** 20	<u> </u>	a. —		X\$ 9=		OR	X\$18=		
	Independent	* 3	Minus	***	S Alla	-		X43=		OR	X86=	·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL ODIT. FEE		I DB	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								(DDII. FEE I			~DDII: 1 EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AUA	=		X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		. 1	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.													
**	f the "Highest Nur	mber Pr viously Pa mber Pr viously Pa	id For IN THIS	S SPACE is	less that	n 20, enter "20."	A	TOTAL DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					foun	d in the ann	ropriate box	in col	ımn 1.	1	